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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Address to: Commissioner for Patents Box RCE Washington, DC 20231	Application Number	09/446,629
	Filing Date	March 23, 2000
	First Named Inventor	Razi VAGO
	Group Art Unit	3738
	Examiner Name	Hieu Phan
	Attorney Docket No.	229752001000

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.114	
a. <input checked="" type="checkbox"/> Previously submitted	
i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on <u>July 3, 2003</u> (Any unentered amendment(s) referred to above will be entered).	
ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____	
iii. <input type="checkbox"/> Other _____	
b. <input type="checkbox"/> Enclosed	
i. <input type="checkbox"/> Amendment/Reply	
ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)	
iii. <input type="checkbox"/> Information Disclosure Statement (IDS)	
iv. <input type="checkbox"/> Other _____	
2. Miscellaneous	
a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)	
b. <input type="checkbox"/> Other _____	
3. Fees The RCE fee under 37 CFR 1.17 (e) is required by 37 CFR 1.114 when the RCE is filed.	
a. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. <u>13-1952</u>	
i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e)	
ii. <input checked="" type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17)	
iii. <input type="checkbox"/> Other _____	
b. <input type="checkbox"/> Check in the amount of \$ _____ enclosed	
c. <input type="checkbox"/> Payment by credit card (Form PTO-2038 enclosed)	

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Name (Print/Type)	Jonathan Bockman	Registration No. (Attorney/Agent)	45,640
Signature		Date	September 2, 2003

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